



CITY OF SURPRISE BENEFIT INFORMATION FY 2015

BENEFIT CONTRIBUTION BREAKDOWN

MEDICAL – HMO (BLUE CHOICE)				
Blue Cross/ Blue Shield	Total Monthly Cost	Employer Cost Monthly	Employee Cost Monthly	Employee Cost Per Pay Period (24 pay periods)
HMO				
Employee Only	\$586.64	\$527.43	\$59.21	\$29.61
Employee + 1	\$1,173.29	\$945.74	\$227.55	\$113.78
Employee + Family	\$1,642.60	\$1,280.38	\$362.22	\$181.11
MEDICAL – PPO (BLUE PREFERRED)				
Blue Cross/ Blue Shield	Total Monthly Cost	Employer Cost Monthly	Employee Cost Monthly	Employee Cost Per Pay Period (24 pay periods)
PPO				
Employee Only	\$567.23	\$508.02	\$59.21	\$29.61
Employee + 1	\$1,134.45	\$918.04	\$216.41	\$108.21
Employee + Family	\$1,588.22	\$1,241.60	\$346.62	\$173.31
DENTAL – PPO				
MetLife	Total Monthly Cost	Employer Cost Monthly	Employee Cost Monthly	Employee Cost Per Pay Period (24 pay periods)
PPO				
Employee Only	\$32.23	\$27.88	\$4.35	\$2.18
Employee + 1	\$63.87	\$49.11	\$14.76	\$7.38
Employee + Family	\$103.45	\$72.41	\$31.04	\$15.52
VISION - PPO				
Avesis	Total Monthly Cost	Employer Cost Monthly	Employee Cost Monthly	Employee Cost Per Pay Period (24 pay periods)
Employee Only	\$4.77	\$4.77	\$0.00	\$0.00
Employee + Family	\$13.55	\$10.04	\$3.51	\$1.76